



Patent
Attorney's Docket No. 019519-267

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)
Nobuyuki KITA et al.) Group Art Unit: 1752
Application No.: 09/662,548) Examiner: B. Gilmore
Filed: September 15, 2000) Confirmation No.: 1924
For: HEAT-SENSITIVE LITHOGRAPHIC)
PRINTING PLATE PRECURSOR)

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TC 1700

**REQUEST FOR CONTINUED EXAMINATION
TRANSMITTAL LETTER**

MAIL STOP RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer No. **21839**

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the
[] \$375.00 (2801) [X] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).

1. [X] A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.

[] B. Applicant(s) previously submitted the following documents for which continued examination is requested:

[] Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _

[] Consider the arguments in the Appeal Brief or Reply Brief previously filed on _

[] Other: _____

2. The following documents are enclosed with this submission:

[X] Amendment/Reply.

[] Affidavit(s)/Declaration(s).

[] Information Disclosure Statement (IDS).

[] Petition for Extension of Time.

[] Other: _____

3. [] Small entity status is hereby claimed.

[] No additional claim fee is required.

[X] The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

07/28/2003 JBALINAN 00000103 09662548

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750.00 OP

(05/03)

Request for Continued Examination Transmittal Letter

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| C L A I M S | | | | | |
|---|------------------|---|-----------------|--------------------|--------------------|
| | NO. OF CLAIMS | HIGHEST NO. OF CLAIMS THUS PAID FOR | EXTRA CLAIMS | RATE | FEE |
| Basic Fee | | | | | \$750.00 (1001) |
| Total Claims | 18 | MINUS 20 = | 0 | × \$18.00 (1202) = | |
| Independent Claims | 4 | MINUS 3 = | 1 | × \$84.00 (1201) = | 84.00 |
| If multiple dependent claims are presented, add \$280.00 (1203) | | | | | 280.00 |
| Total Fee | | | | | 1,114.00 |
| If small entity status is claimed, subtract 50% of Total Fee | | | | | |
| TOTAL FEE DUE | | | | | \$1,114.00 |

4. ☒ A check in the amount of \$ 1,114 is enclosed for the fee due.
5. ☐ Charge \$ _____ to Deposit Account No. 02-4800 for the fee due.
6. ☐ Applicant(s) requests suspension of action by the Office until at least __, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: July 25, 2003

By: Robert G. Mukai
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